

Commonwealth of Kentucky Personnel Cabinet

Prepared for:

Kentucky Group Health Insurance
Board Members

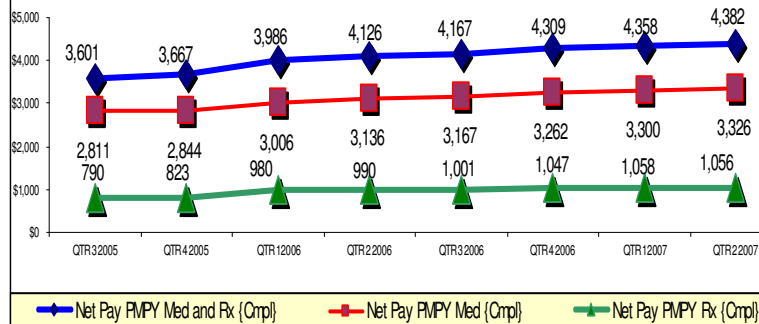
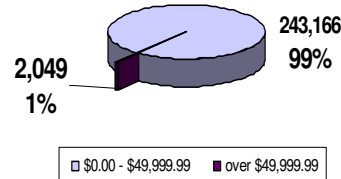
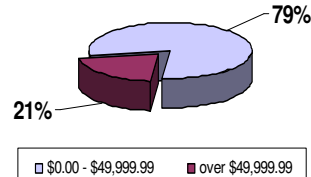
November 2007

1. Enrollment

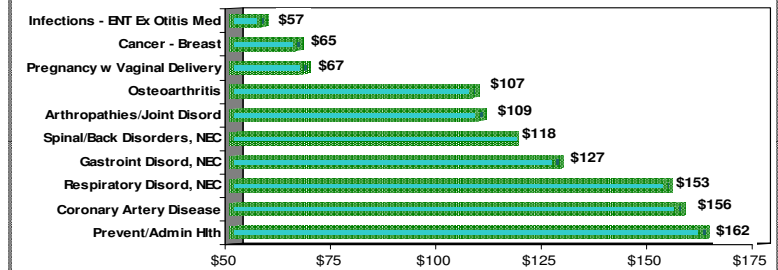
Fact	2007	2006	% Change
Employees Avg Med	148,621	145,422	2.20%
Members Avg Med	240,150	233,065	3.00%
Family Size Avg	2	2	0.80%
Member Age Avg	37	38	-2.70%

2. Net Incurred Claims Cost Per Member

(PMPY Costs as Calculated at the End of each Quarter)

**4. High Cost Claimants**
July 2006 - June 2007**% of High Cost Patients****% of Total Net Payments (Med & Rx)****5. Prescription Drug Programs**

		Jun 2006	Jun 2007	Change
Mail	Discount Off AWP % Rx	30.17%	33.18%	9.96%
	Scripts Generic Efficiency Rx	88.74%	91.27%	2.85%
Retail	Discount Off AWP % Rx	30.33%	34.64%	14.21%
	Scripts Generic Efficiency Rx	92.87%	94.59%	1.85%
Total	Discount Off AWP % Rx	30.31%	34.44%	13.65%
	Scripts Generic Efficiency Rx	92.70%	94.46%	1.90%
	Scripts Maint Rx % Mail Order	6.42%	6.04%	-5.96%

7. Top 10 Clinical Conditions(Medical Only)- Net Pay PMPY Med
July 2006 - June 2007**3. Allowed Claims Costs PMPY with Norms**

	Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	Trend	Recent US Norm	Comp to Norm
Allow Amt PMPY Med (Cmpl)	\$3,341	\$3,673	10%	\$3,575	3%
Allow Amt PMPY IP Acute (Cmpl)	\$965	\$1,029	7%		
Allow Amt PMPY OP Med (Cmpl)	\$2,357	\$2,632	12%	\$2,452	7%
Allow Amt PMPY OP Fac Med (Cmpl)	\$1,015	\$1,160	14%		
Allow Amt PMPY Office Med (Cmpl)	\$840	\$922	10%		
Allow Amt PMPY OP Lab (Cmpl)	\$174	\$233	34%		
Allow Amt PMPY OP Rad (Cmpl)	\$360	\$460	28%		
Out of Pocket PMPY Med (Cmpl)	\$316	\$325	3%	\$650	-100%
Allow Amt PMPY Rx (Cmpl)	\$1,135	\$1,257	11%	\$1,019	19%
Out of Pocket PMPY Rx (Cmpl)	\$238	\$213	-10%		
				Below Norm	
				Above Norm	

6.h Cost Driver Support Table

	Jun 2006	Jun 2007	Change
Days Supply PMPY Rx	513.02	566.02	10.33%
Allow Amt/Day Supply Rx	\$2.21	\$2.22	0.34%
Visits/1000 Office Med	7,879.93	8,335.49	5.78%
Allow Amt/Visit Office Med	\$106.55	\$110.65	3.85%
Visits/1000 OP Fac Med	1,540.20	1,707.05	10.83%
Allow Amt/Visit OP Fac Med	\$658.87	\$679.51	3.13%
Days/1000 Adm Acute	331.02	340.07	2.73%
Allow Amt/Day Adm Acute	\$2,861.07	\$2,919.02	2.03%

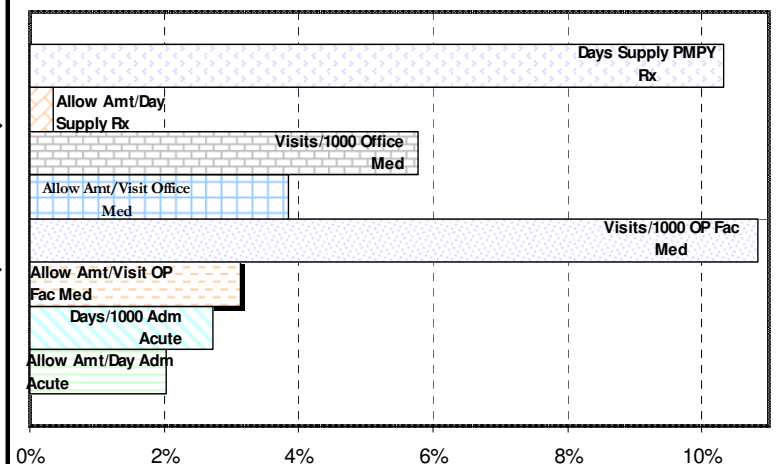
6. Cost Drivers ----- Utilization and Price Trends

Table of Contents

Introduction	4
Overview	4
Definitions.....	5
Enrollment.....	6
Enrollment (continued)	7
Claims Costs	8
Claims Costs (continued)	9
Claims Costs (continued)	10
Claims Costs (continued)	11
Medical Claims Utilization	12
Analysis of Individuals and Families meeting their Maximum Out of Pocket Expenses.....	15
Analysis of Individuals and Families meeting their Maximum Out of Pocket Expenses (continued)	16
Premium (or Premium Equivalent)	17
Utilization.....	24
Claims Lag Analysis	26
Claims Distribution based on Age/Gender	28
Allowed Amount Distribution	29
Summary of Enrollment and Claims.....	30

Introduction

The Department for Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees Health Plan. In response to requests for data analysis this report has been prepared to provide information related to enrollment, claims payment, and utilization.

It is the Department's intent to update this information on a monthly basis in an effort to continue to provide current information about Kentucky's Health Insurance Program.

Overview

This report is compiled using Medstat, which is DEI's health insurance information management system. Medstat warehouses enrollment and claims data. Enrollment data is provided by DEI while claims data is provided by each carrier and/or TPA.

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding dependents, dropping dependents, marriage, divorce, becoming Medicare eligible, etc. Therefore, Medstat is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2005 Medstat processed enrollment information for a total **of 253,984** members as well **as 7,196,140** claims (3,083,368 Medical claims and 4,048,855 prescriptions) from five different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Medstat.

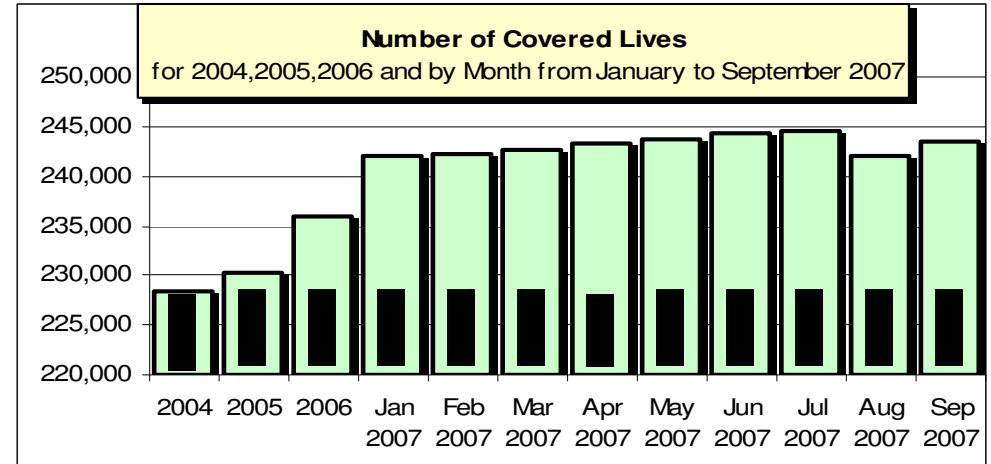
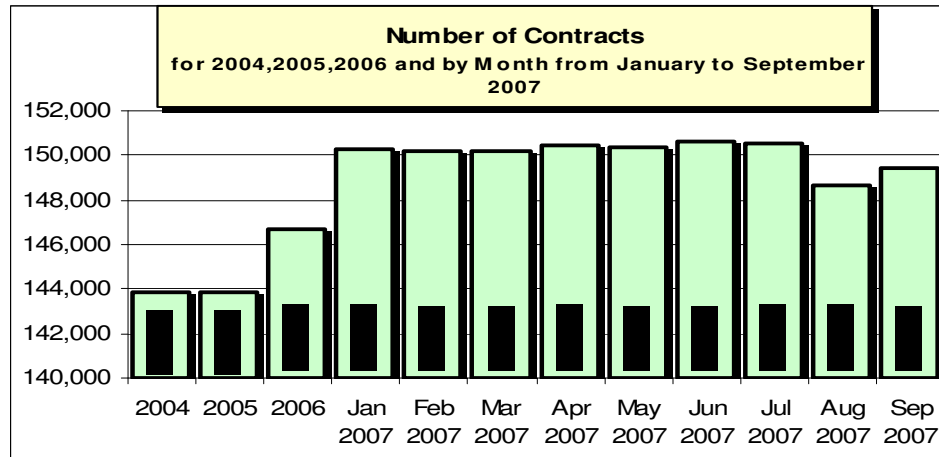
Definitions

DEI utilized the following definitions in preparing reports:

- “Employee” represents an individual eligible to participate in KEHP as a retiree in either KTRS or KRS, or by being employed by one of the agencies that participate with KEHP (example: state employee, school boards, Quasi agency, etc.). Employee may also be referred to as “planholder” or “contracts”. Please note that Medstat deals with Cross-reference plans uniquely. Although there are in fact two “employees” Medstat can only designate the planholder as an employee. Therefore, the cross-referenced spouse is considered a dependent and all claims and utilization data related to them is counted as a “member”.
- “Member” includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as “covered lives”.
- “Group” is Kentucky Retirement System (KRS), Kentucky Teachers Retirement System (KTRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, Quasi/Local Governments).
- “Plan” is Commonwealth Essential, Commonwealth Enhanced, Commonwealth Premier, Commonwealth Select, HMO Option A, HMO Option B, POS Option A, POS Option B, PPO Option A, PPO Option B, or EPO Option C.
- “Carrier” may be Aetna, Anthem, Bluegrass Family Health, CHA Health, United Healthcare, or Humana (please note that Express Scripts data is designated as Humana).
- “Generic Efficiency” means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- “OOP” is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- “Allowed Amount” is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.
- “Net Payment” is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- “Patients” is the unique count of members who received facility, professional, or pharmacy services.
- “Days Supply” is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- “Mail Order” is computed as any script filled with a “days supply” of more than 30 days, regardless of the physical location where the prescription was filled.
- “Retail” is computed as any script filled with a “days supply” of 30 days or less, regardless of the physical location where the prescription was filled.

Enrollment

The following charts show planholder enrollment (contracts) and member enrollment (covered lives) for 2004, 2005, 2006 and monthly year-to-date for 2007. (Note: enrollment will fluctuate on a monthly basis. (approximately 7,000 cross-referenced spouses in any given month are not included)



The following table shows the number of cross-reference spouses for 2004, 2005, 2006 and monthly year-to-date for 2007:

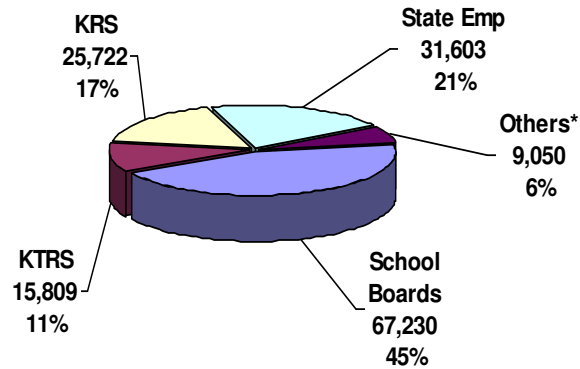
Time Period	# of Cross-Reference Spouses
2004	5,008
2005	7,017
2006	7,130
Jan 2007	7,227
Feb 2007	7,217
Mar 2007	7,266
Apr 2007	7,284
May 2007	7,321
Jun 2007	7,339
Jul 2007	7,349
Aug 2007	7,300
Sep 2007	7,326

The number of Cross Referenced Spouses will fluctuate on a monthly basis.

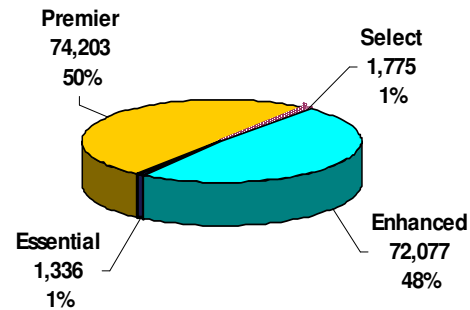
Enrollment (continued)

The following charts show Planholder and Member enrollment by group, plan, and coverage level.

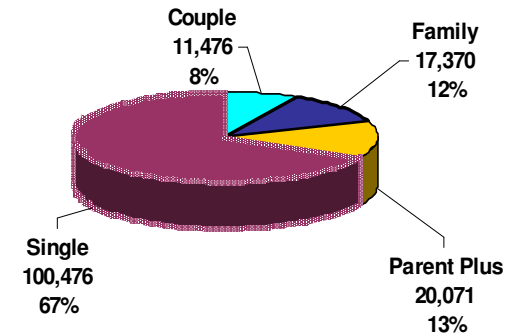
**Planholders by Group
September 2007**



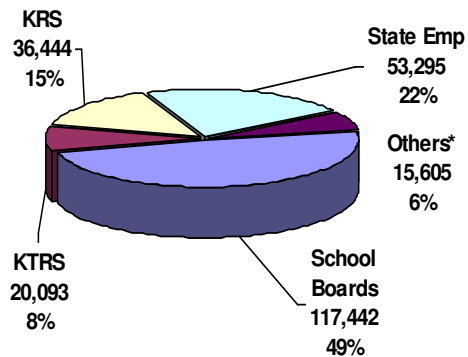
**Planholders by Plan
September 2007**



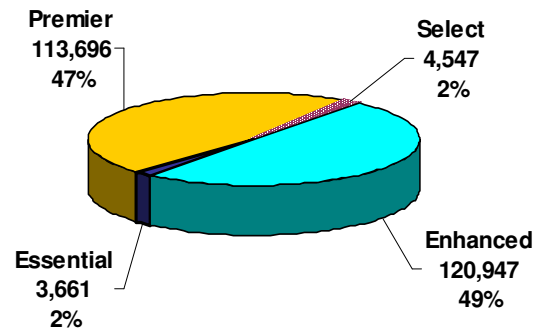
**Planholders by Coverage Level
for September 2007**



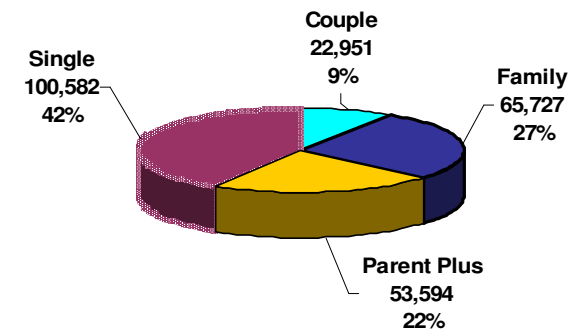
**Members by Group
for September 2007**



**Members by Plan
for September 2007**



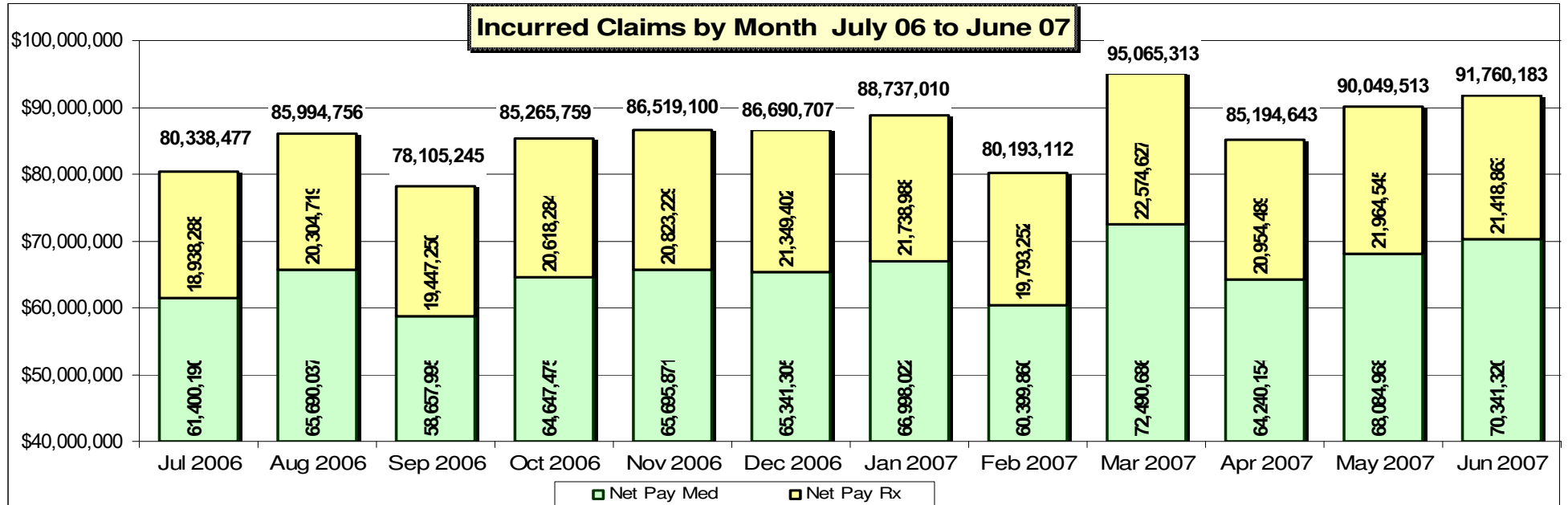
**Members by Coverage Level
for September 2007**



Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs

Claims costs include Medical and Prescription (Rx) for the most recent rolling year. Based on Incurred Claims.



Claims Costs (continued)

The following tables represent **incurred** claims by **Group** for 2004, 2005, 2006 and monthly year-to-date for 2007.

INCURRED MEDICAL CLAIMS (no Rx) by Group:

	School Boards	KTRS	KRS	State Employees	Others	Totals
2004	\$246,135,396	\$70,821,610	\$105,462,079	\$123,071,292	\$44,914,612	\$590,404,988
2005	\$258,740,079	\$80,441,671	\$122,058,942	\$127,040,659	\$43,862,327	\$632,143,678
2006	\$304,931,742	\$93,414,047	\$145,451,845	\$150,086,233	\$48,131,528	\$742,015,396
Jan-07	\$27,860,996	\$8,582,039	\$13,689,682	\$12,843,755	\$4,021,551	\$66,998,022
Feb-07	\$26,094,675	\$7,097,370	\$12,348,101	\$10,972,881	\$3,886,834	\$60,399,860
Mar-07	\$29,763,555	\$9,588,994	\$15,195,391	\$13,530,729	\$4,412,019	\$72,490,686
Apr-07	\$26,961,012	\$7,614,710	\$12,928,489	\$12,587,737	\$4,148,207	\$64,240,154
May-07	\$27,945,051	\$8,203,913	\$13,378,830	\$13,542,171	\$5,015,003	\$68,084,968
Jun-07	\$33,077,771	\$8,434,005	\$12,591,333	\$11,837,331	\$4,400,879	\$70,341,320

INCURRED Rx CLAIMS (no Med) by Group:

	School Boards	KTRS	KRS	State Employees	Others	Totals
2004	\$48,323	\$2,484	\$65,868	\$0	\$58,944,685	\$13,448,392
2005	\$69,891,805	\$27,094,171	\$39,706,608	\$34,310,246	\$11,822,500	\$182,825,330
2006	\$92,667,491	\$35,019,109	\$53,074,993	\$42,873,231	\$13,500,921	\$237,135,744
Jan-07	\$8,514,418	\$3,115,584	\$4,958,379	\$3,839,093	\$1,311,513	\$21,738,988
Feb-07	\$7,892,903	\$2,714,948	\$4,477,290	\$3,488,851	\$1,219,260	\$19,793,252
Mar-07	\$8,986,397	\$3,156,203	\$5,148,686	\$4,002,112	\$1,281,228	\$22,574,627
Apr-07	\$8,166,576	\$2,979,685	\$4,869,977	\$3,755,633	\$1,182,618	\$20,954,489
May-07	\$8,587,126	\$3,133,068	\$4,986,836	\$3,932,579	\$1,324,937	\$21,964,545
Jun-07	\$8,551,818	\$3,017,624	\$4,887,086	\$3,715,610	\$1,246,725	\$21,418,863

- Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).
-

Claims Costs (continued)

The following tables represent **incurred claims by Plan** for 2004, 2005, 2006 and monthly year-to-date for 2007

INCURRED MEDICAL CLAIMS (No Rx) by PLAN:

	Commonwealth							
Time Period	Enhanced	Essential	Premiere	Select	Old HMO Products	Old POS Products	Old PPO Products	Old EPO Products
2004	\$247,933	\$96,285	\$389,307	\$0	\$212,909,645	\$40,885,382	\$325,224,613	\$5,524,470
2005	\$224,051,710	\$5,706,438	\$398,847,631	\$807	\$12,164	\$900	\$179,854	\$70
2006	\$285,315,576	\$5,318,864	\$447,017,973	\$2,399	\$0	\$0	\$0	\$0
January-07	\$25,771,064	\$428,355	\$40,188,517	\$227,041	\$0	\$0	\$0	\$0
February-07	\$22,672,074	\$317,607	\$36,569,451	\$354,192	\$0	\$0	\$0	\$0
March-07	\$27,919,464	\$274,639	\$43,508,415	\$398,332	\$0	\$0	\$0	\$0
April-07	\$25,093,181	\$536,884	\$37,923,865	\$409,745	\$0	\$0	\$0	\$0
May-07	\$26,471,905	\$370,649	\$40,006,460	\$815,110	\$0	\$0	\$0	\$0
June-07	\$27,647,308	\$422,081	\$41,394,449	\$597,155	\$0	\$0	\$0	\$0

INCURRED Rx CLAIMS (No Medical) by PLAN:

	Commonwealth							
Time Period	Enhanced	Essential	Premiere	Select	Old HMO Products	Old POS Products	Old PPO Products	Old EPO Products
2004	\$48,323	\$2,484	\$65,868	\$0	\$58,944,685	\$13,448,392	\$94,468,063	\$678,460
2005	\$64,800,801	\$1,344,708	\$115,891,021	\$0	\$12,237	\$3,874	\$21,588	\$496
2006	\$86,145,763	\$1,164,634	\$148,787,306	\$0	\$0	\$0	\$0	\$0
January-07	\$8,081,922	\$83,881	\$13,469,752	\$11,420	\$0	\$0	\$0	\$0
February-07	\$7,438,963	\$74,503	\$12,158,967	\$34,786	\$0	\$0	\$0	\$0
March-07	\$8,409,472	\$87,976	\$13,974,887	\$54,659	\$0	\$0	\$0	\$0
April-07	\$7,908,884	\$76,055	\$12,841,719	\$88,477	\$0	\$0	\$0	\$0
May-07	\$8,192,673	\$77,652	\$13,541,632	\$103,701	\$0	\$0	\$0	\$0
June-07	\$8,009,955	\$74,419	\$13,162,747	\$136,304	\$0	\$0	\$0	\$0

*HMO = HMO Option A plus HMO Option B POS = POS Option A plus POS Option B

PPO= PPO Option A plus PPO Option B

*Missing means the claims could not be tagged to a specific plan.

Claims Costs (continued)

The following represents **incurred medical claims only** (does not include Rx) by Coverage Level for 2004, 2005, 2006 and monthly year-to-date for 2007.

Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2004	\$79,153,612	\$103,816,354	\$86,064,075	\$316,243,594	\$5,127,353	\$590,404,988
2005	\$87,258,666	\$118,827,302	\$89,294,800	\$333,418,414	\$3,344,496	\$632,143,678
2006	\$105,272,857	\$141,257,933	\$103,152,302	\$387,971,720	\$4,360,584	\$742,015,396
Jan-07	\$8,830,473	\$12,764,024	\$9,722,186	\$35,298,295	\$383,044	\$66,998,022
Feb-07	\$9,038,710	\$11,317,467	\$8,713,224	\$30,843,924	\$486,536	\$60,399,860
Mar-07	\$10,864,864	\$12,811,406	\$10,454,343	\$37,970,237	\$389,837	\$72,490,686
Apr-07	\$9,380,556	\$11,597,464	\$8,859,263	\$34,126,392	\$276,480	\$64,240,154
May-07	\$9,549,400	\$12,882,821	\$8,735,259	\$36,496,644	\$420,844	\$68,084,968
Jun-07	\$9,526,623	\$13,480,000	\$9,579,054	\$37,475,316	\$280,327	\$70,341,320

The following represents **incurred Rx claims only** (does not include Medical) by Coverage Level for 2004, 2005, 2006 and monthly year-to-date for 2007.

Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2004	\$25,936,162	\$29,646,678	\$19,041,619	\$93,031,815	\$840,678	\$168,496,952
2005	\$28,909,054	\$34,190,171	\$19,157,715	\$99,817,506	\$750,884	\$182,825,330
2006	\$38,227,226	\$43,800,355	\$25,937,306	\$128,132,988	\$1,037,868	\$237,135,744
Jan-07	\$3,476,116	\$3,984,212	\$2,485,334	\$11,701,323	\$92,002	\$21,738,988
Feb-07	\$3,185,868	\$3,617,664	\$2,341,744	\$10,561,948	\$86,028	\$19,793,252
Mar-07	\$3,606,024	\$4,228,470	\$2,595,395	\$12,097,113	\$47,625	\$22,574,627
Apr-07	\$3,361,563	\$3,827,535	\$2,410,434	\$11,315,608	\$39,349	\$20,954,489
May-07	\$3,556,625	\$4,073,876	\$2,384,873	\$11,900,285	\$48,887	\$21,964,545
Jun-07	\$3,430,758	\$3,974,310	\$2,298,786	\$11,679,571	\$35,438	\$21,418,863

* Unable to tag claims to a specific coverage level

Medical Claims Utilization

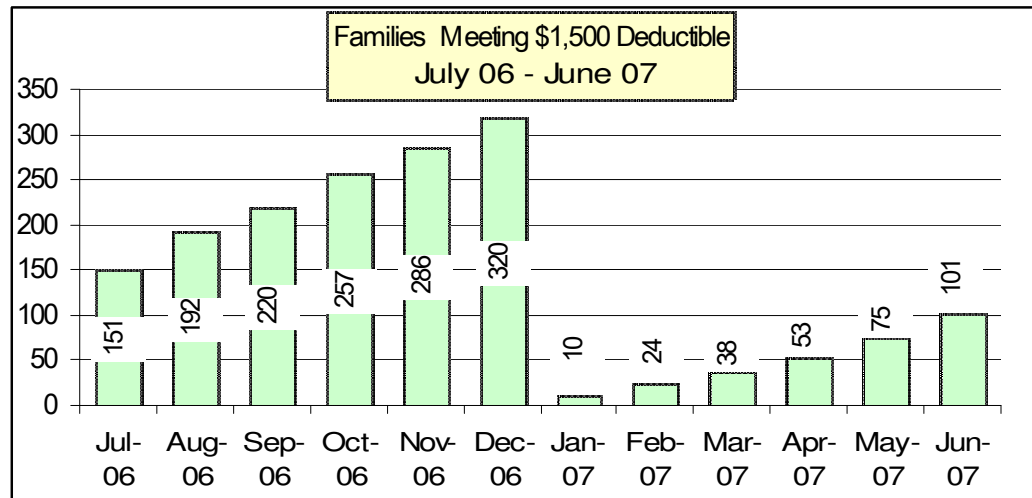
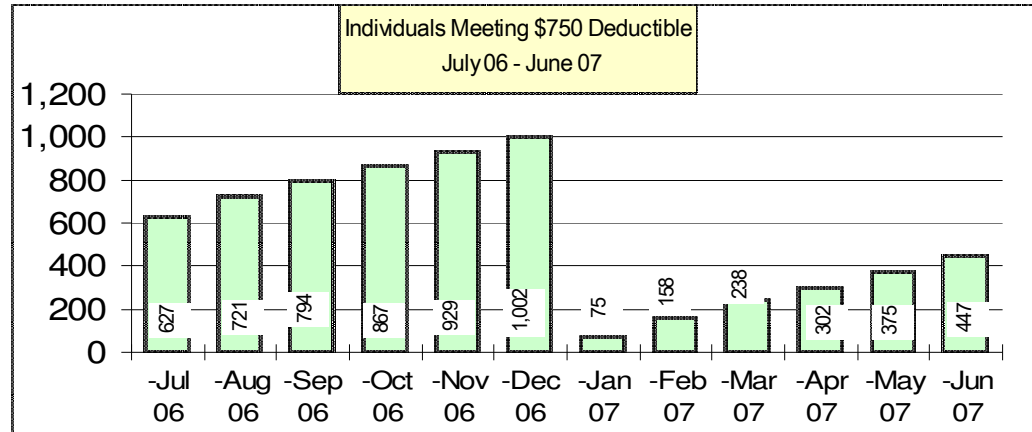
The following is based on medical claims (does not include Rx) incurred from January 2007 through May 2007. (Note: Services are tracked by each service, not by each visit. Therefore if two laboratory services are performed at one visit, it will count as two services.)

Jan - Jun, 2007	Admits Per 1000 Acute	Admits Per 1000 Acute {Rcnt SGovt}	%Diff from {Rcnt SGovt}	Days LOS Admit Acute	Days LOS Admit Acute {Rcnt SGovt}	%Diff from {Rcnt SGovt}	Days Per 1000 Adm Acute	Days Per 1000 Adm Acute {Rcnt SGovt}	%Diff from {Rcnt SGovt}
Commonwealth Enhanced	72.01	68.44	5.21%	3.72	3.75	-0.72%	268.01	279.59	-4.14%
Commonwealth Essential	59.07	58.29	1.34%	3.38	3.63	-6.89%	199.77	240.08	-16.79%
Commonwealth Premiere	104.8	76.42	37.14%	3.95	3.89	1.39%	413.58	331.66	24.70%
Commonwealth Select	51.88	55.11	-5.87%	3.61	3.75	-3.78%	187.41	217.56	-13.86%
Total	71.94	64.57	11.42%	3.67	3.76	-2.40%	267.19	267.22	-0.01%

Analysis of Individuals and Families meeting their Deductibles

The following details the number of individuals and families by plan, meeting their deductible amounts for the most recent rolling year. The report is based on incurred claims.

Commonwealth Essential

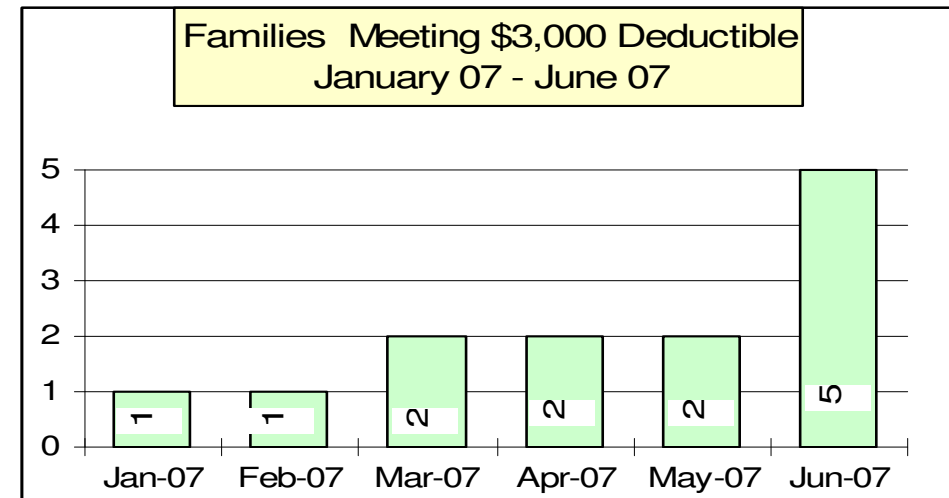
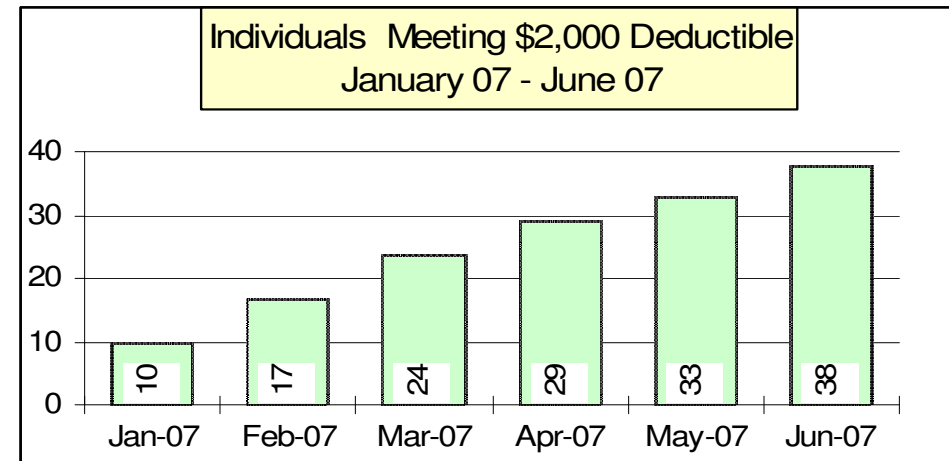


Commonwealth Essential:

2005: A total of **18.63%** of Individuals and **11.45%** of Families met deductibles
2006: A total of **22.14%** of Individuals and **16.40%** of Families met deductibles.

In 2007, a total of **12.0%** of Individuals and **7.04%** of Families met Deductibles

Commonwealth Select



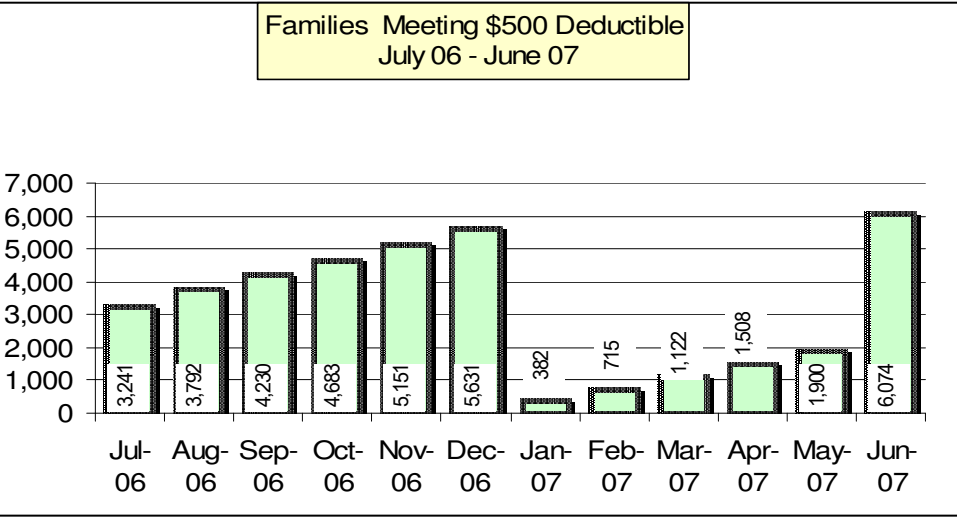
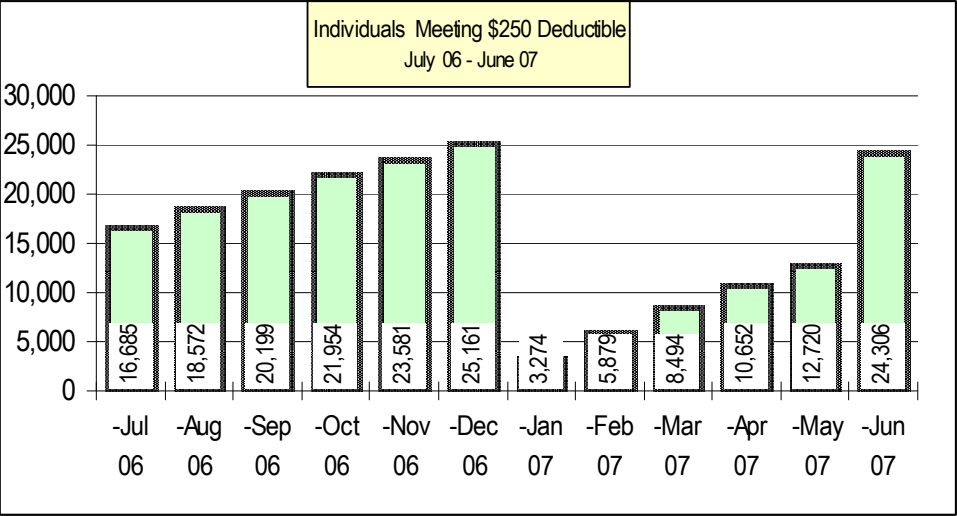
Commonwealth Select:

A total of **0.89%** of Individuals and **0.28%** of families met their Deductibles

Note: The Select Plan deductible consists of medical costs only. Rx costs are part of the Max Out of Pocket (MOP)

Analysis of Individuals and Families meeting their Deductibles (continued)

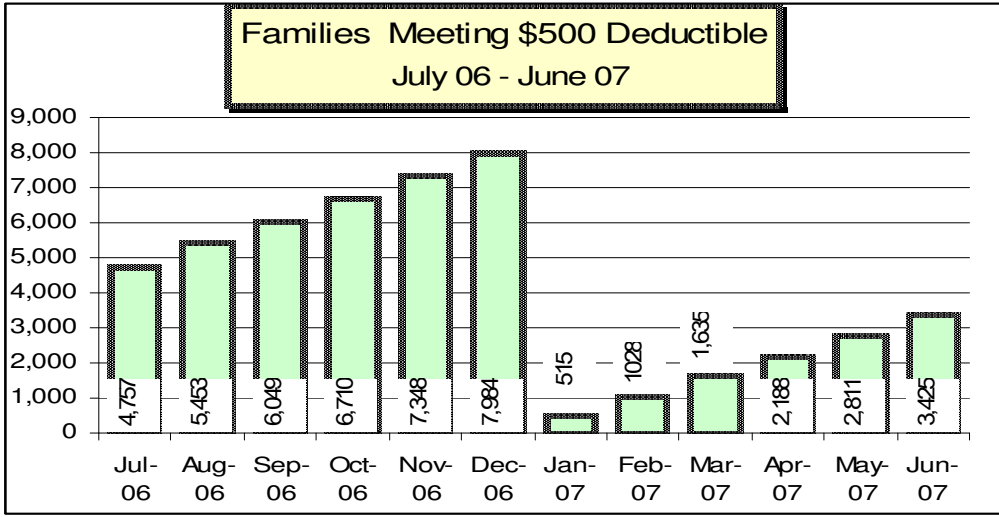
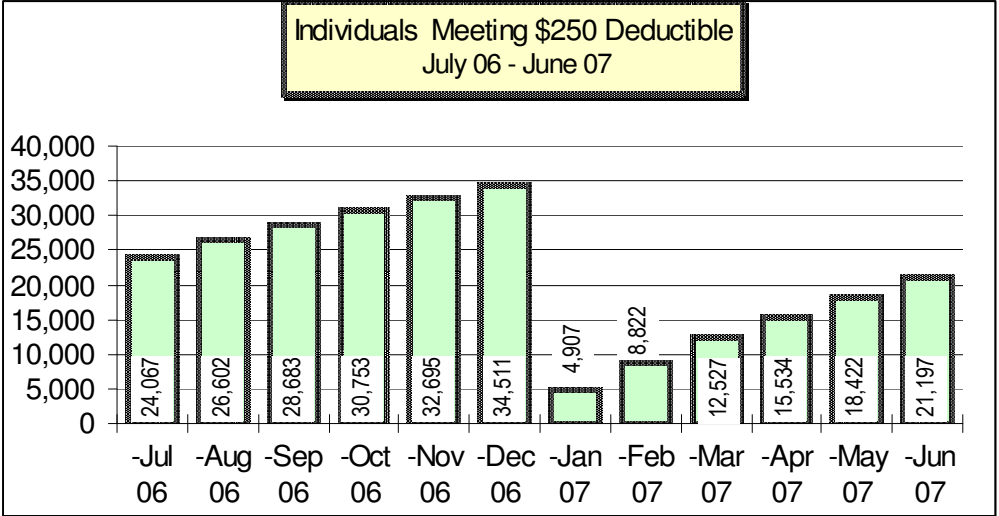
Commonwealth Enhanced



Commonwealth Enhanced

2005: A total of **19.36%** of Individuals and **4.59%** of Families met their deductibles.
2006: A total of **21.49%** of Individuals and **7.21%** of Families met their deductibles
In 2007, a total of 20.20% of Individuals and 8.15% of Families met their Deductibles

Commonwealth Premier



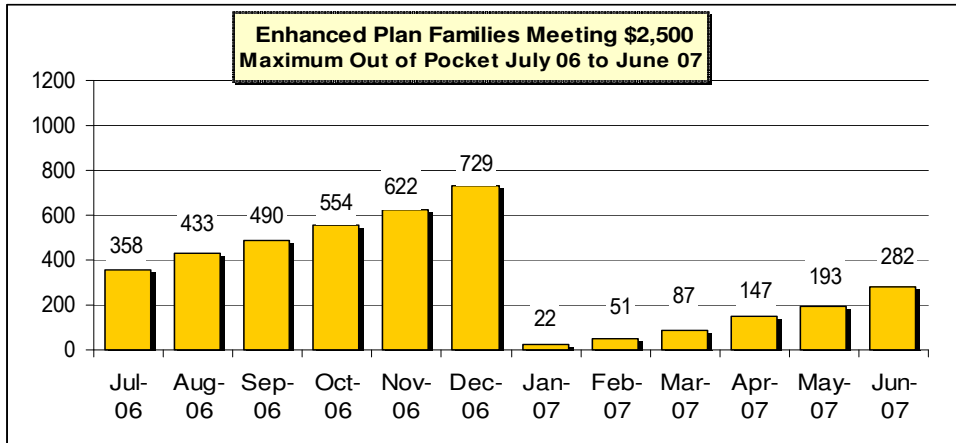
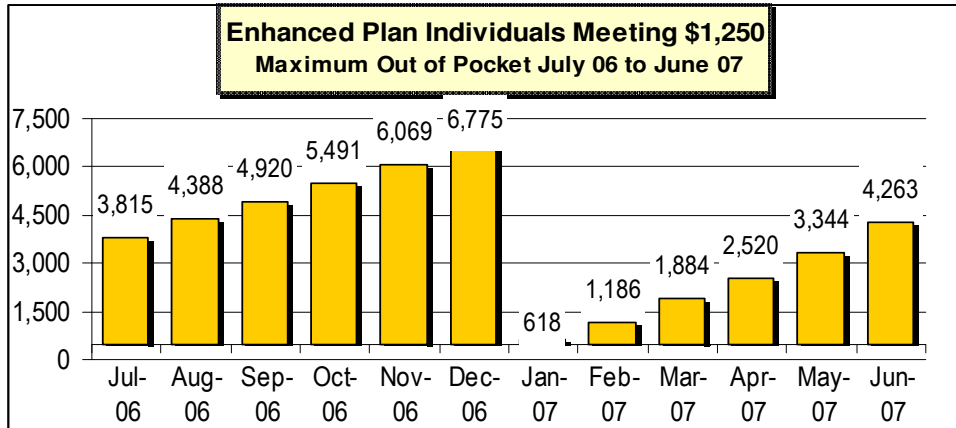
Commonwealth Premier

2005: A total of **27.80%** of Individuals and **6.65%** of Families met their deductibles.
2006: A total of **30.15%** of Individuals and **9.95%** of Families met their deductibles.
In 2007, a total of 18.48% of Individuals and **4.42%** of Families met their Deductibles.

Analysis of Individuals and Families meeting their Maximum Out of Pocket Expenses

The following details the number of individuals and families by plan, meeting their maximum out of pocket (MOP) amounts for the most recent rolling year. The report is based on incurred claims.

Commonwealth Enhanced



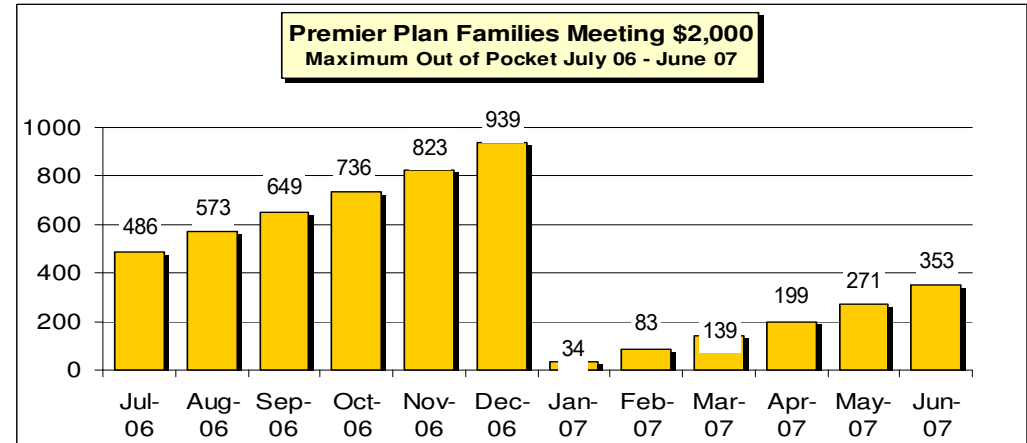
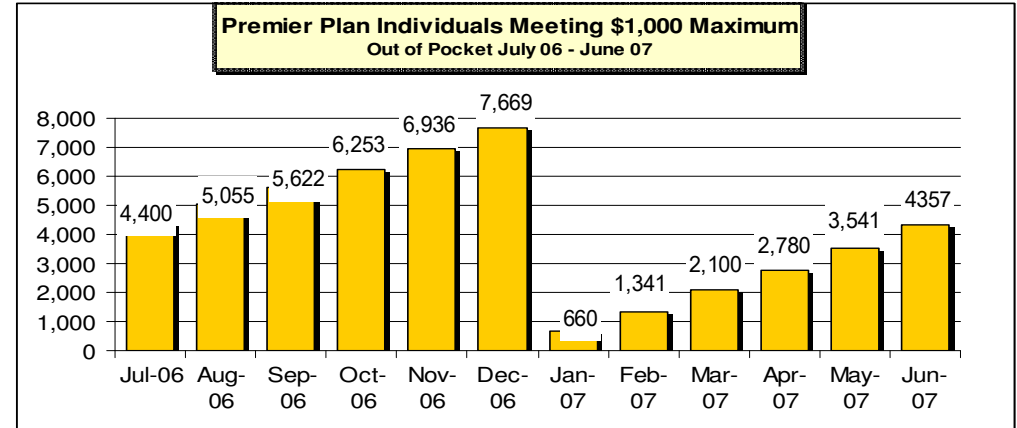
Commonwealth Enhanced

2005 Enhanced: A total of **3.34%** of Individuals and **0.31%** of Families met their MOPs.

2006 Enhanced: A total of **5.79%** of Individuals and **0.93%** of Families met their MOPs.

During 2007, a total of **3.54%** of Individuals and **0.38%** of Families met their Enhanced MOPs

Commonwealth Premier



Commonwealth Premier

2005 Premier: A total of **3.38%** of Individuals and **0.53%** of Families met their MOPs

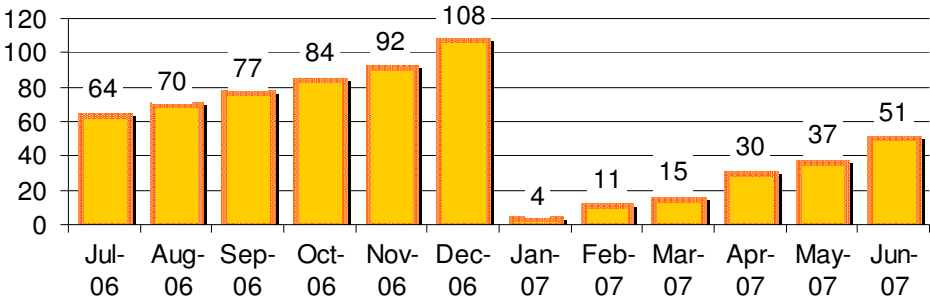
2006 Premier: A total of **6.70%** of Individuals and **1.17%** of Families met their MOPs.

During 2007, a total of **3.80%** of Individuals and **0.46%** of Families met their Premier MOPs

Analysis of Individuals and Families meeting their Maximum Out of Pocket Expenses (continued)

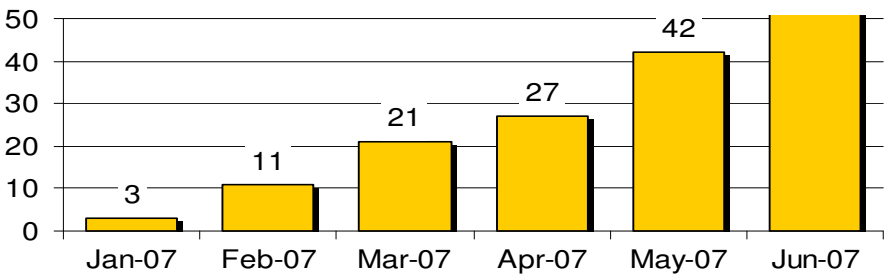
Commonwealth Essential

**Essential Plan Individuals Meeting \$3,500
Maximum Out of Pocket July 06 to June 07**

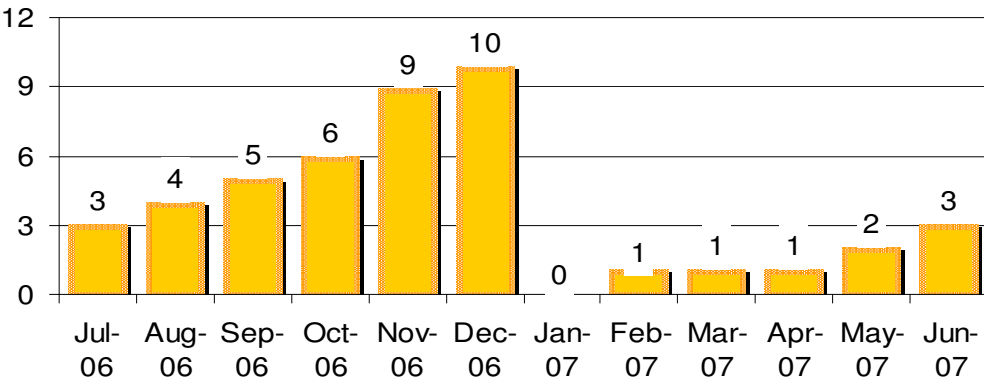


Commonwealth Select

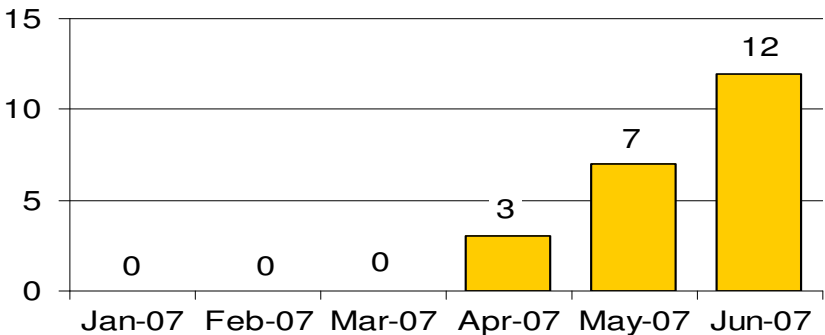
**Select Plan Individuals Meeting \$3,000
Maximum Out of Pocket January 07 to June 07**



**Essential Plan Families Meeting \$7,000
Maximum Out of Pocket July 06 to June 07**



**Select Plan Families Meeting \$4,500 Maximum
Out of Pocket January 07 to June 07**



Commonwealth Essential

Essential: A total of **1.14%** of Individuals and **0.22%** of Families met their MOPs
Essential: A total of **2.36%** of Individuals and **0.51%** of Families met their MOPs
During 2007, a total of 0.99% of Individuals and 0.14% of Families met their Essential MOPs.

Commonwealth Select

A total of **0.99%** of individuals and **0.40%** of families with Select Plans met their MOPs.
Note: For the Select Plan only, prescription drug coinsurance is included in MOP totals.

Premium (or Premium Equivalent)

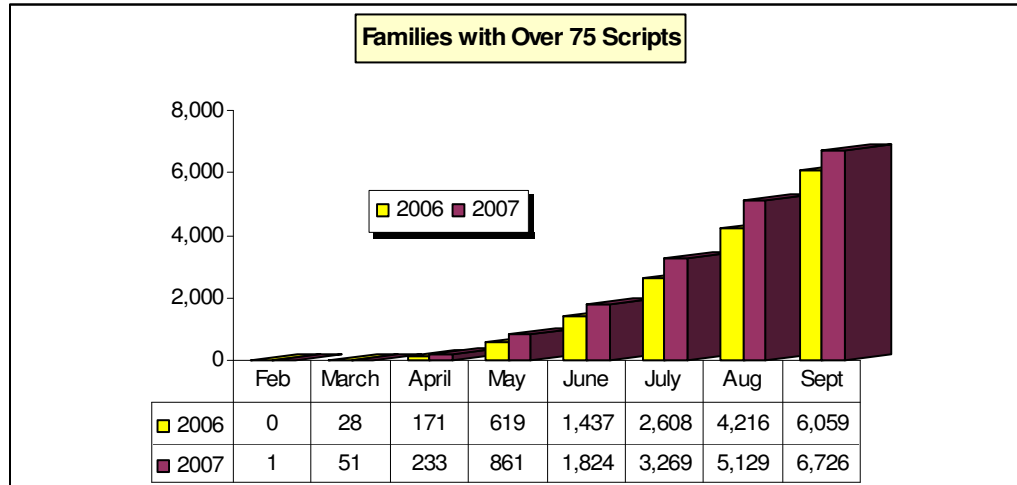
The following details the amount of premium (or premium equivalent) paid by the employee and employer for 2005, 2006, and monthly year-to-date for 2007.

Time Period	Employee Premium Amount	Employer Premium Amount	Total Premium Amount
2004	\$213,004,714	\$492,025,888	\$705,030,602
2005	\$148,029,637	\$779,647,097	\$927,676,733
2006	\$153,787,780	\$948,458,338	\$1,102,246,118
Jan-07	\$14,016,671	\$80,542,856	\$94,559,527
Feb-07	\$14,044,597	\$80,471,968	\$94,516,565
Mar-07	\$13,794,423	\$80,762,937	\$94,557,360
Apr-07	\$13,833,486	\$80,943,164	\$94,776,651
May-07	\$13,847,690	\$80,934,413	\$94,782,103
Jun-07	\$13,894,924	\$81,108,166	\$95,003,089
Jul-07	\$13,957,961	\$81,070,108	\$95,028,069
Aug-07	\$13,832,581	\$80,145,197	\$93,977,778
Sep-07	\$13,928,763	\$80,530,901	\$94,459,663

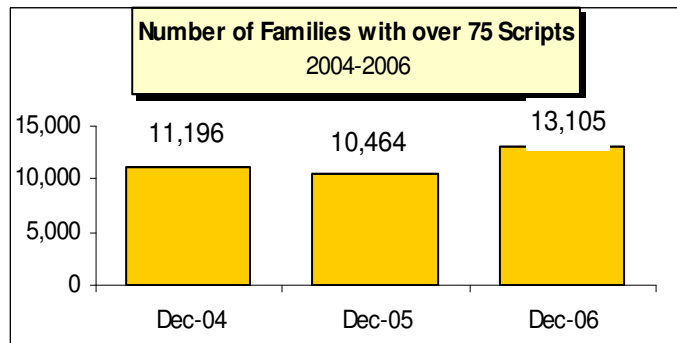
NOTE: Premium (or premium equivalent) is based on enrollment using published premium rates – it is NOT based on actual payments received.

Prescription Drug Utilization

The following details the number of families that have purchased 75 scripts or more during 2004, 2005, 2006 and monthly year-to-date for 2007. After a family has filled 75 prescriptions, via retail purchase, the co-payment is reduced to \$10 for 2nd tier and \$20 for 3rd tier.



	2006	2007	% diff over prior yr
Jan	0	0	NA
Feb	0	1	NA
March	28	51	82.14%
April	171	233	36.26%
May	619	861	39.10%
June	1,437	1,824	26.93%
July	2,608	3,269	25.35%
Aug	4,216	5,129	21.66%
Sept	6,059	6,726	11.01%



		Yearly Incr./Decr
ec-04	11,196	
Dec-05	10,464	-6.54%
Dec-06	13,105	25.24%

Summary of plan impact for families who have met the 75(+) scripts benefit January through August 2007:

Script Count, per Family	Number of Families	Number of Scripts	Avg. # of Scripts per Patient	Avg. Net Payment per Script	Net Payments For All Scripts
0-74	139,554	2,801,322	14.66	49.01	\$ 137,281,036.03
75 (+)	6,726	677,764	49.42	58.99	\$ 39,982,461.53
Total	146,280	3,479,086	16.99	50.95	\$ 177,263,497.56

Note: This benefit exists only for Commonwealth Enhanced and Commonwealth Premier plans and does not include Mail Order drugs.

Prescription Drug Utilization (continued)

The following table details the type of prescription filled, the % that were generic, and the generic efficiency rate for the most recent rolling year. The generic percentage rate and generic efficiency rate increased in 2006. Based on Paid claims.

Time Period	Generic	Brand Name, Generic Available	Brand Name	Other*	Total	Scripts Rx % Generic	Scripts Generic Efficiency Rx
Oct-06	257,988	15,138	165,991	15,154	454,271	56.79%	94.46%
Nov-06	214,979	12,090	131,983	10,327	369,379	58.20%	94.68%
Dec-06	220,525	12,099	133,573	12,878	379,075	58.17%	94.80%
Jan-07	279,869	15,327	174,314	15,974	485,484	57.65%	94.81%
Feb-07	222,598	12,100	140,169	15,528	390,395	57.02%	94.84%
Mar-07	232,208	12,415	144,971	8,865	398,459	58.28%	94.92%
Apr-07	218,416	11,697	138,238	10,075	378,426	57.72%	94.92%
May-07	265,769	14,176	164,345	12,030	456,320	58.24%	94.94%
Jun-07	223,947	17,035	130,855	9,505	381,342	58.73%	92.93%
Jul-07	270,464	20,945	154,594	9,748	455,751	59.34%	92.81%
Aug-07	218,332	17,587	119,484	12,212	367,615	59.39%	92.55%
Sep-07	226,627	17,029	122,841	12,144	378,641	59.85%	93.01%

*Includes: Over the Counter (usually includes items such as diabetic supplies, syringes, and test strips, etc.), Other/Unavailable or Missing (unable to tag to a specific group).

Prescription Drug Utilization (continued)

The following details the number of members and patients **utilizing prescription** benefits and the associated costs for the most recent rolling year. Based on Incurred claims.

	Members	Patients	Scripts	Scripts Per Member	Scripts Per Patient	Allow Amt Per Script	Net Pay Per Script	Member Cost Per Script	Patient Cost Per Script
Jul 2006	235,112	145,335	365,224	1.55	3.00	\$63.01	\$51.85	\$17.33	\$28.03
Aug 2006	233,040	148,342	386,930	1.66	3.07	\$63.36	\$52.48	\$18.07	\$28.39
Sep 2006	233,806	145,420	379,196	1.62	3.02	\$61.89	\$51.29	\$17.21	\$27.66
Oct 2006	238,697	151,801	400,169	1.67	3.09	\$62.04	\$51.52	\$17.64	\$27.73
Nov 2006	239,513	154,682	404,006	1.68	3.07	\$61.83	\$51.54	\$17.36	\$26.88
Dec 2006	239,277	153,566	415,993	1.73	3.11	\$61.40	\$51.32	\$17.52	\$27.29
Jan 2007	241,464	158,366	432,734	1.79	3.15	\$61.23	\$50.24	\$19.10	\$29.12
Feb 2007	241,625	152,931	389,825	1.61	2.95	\$61.69	\$50.77	\$17.12	\$27.05
Mar 2007	241,951	160,096	437,999	1.81	3.15	\$62.53	\$51.54	\$19.42	\$29.36
Apr 2007	242,700	153,019	400,858	1.65	3.04	\$63.21	\$52.27	\$17.72	\$28.10
May 2007	242,972	154,666	417,036	1.71	3.12	\$63.49	\$52.67	\$18.26	\$28.68
Jun 2007	243,692	152,152	396,458	1.62	3.07	\$64.72	\$54.03	\$17.15	\$27.46

* “Allow Amt” is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.

Prescription Drug Utilization (continued)

The following top 25 drug analysis is based on Rx claims incurred January through Junr 2007.

	Product Names	Brand/Generic	Therapeutic Classes	Net Pay Rx	Net Pay Rx as Pct of All Drugs	Scripts Rx	Net Pay Per Day Supply Rx	Patients Rx
1	NEXIUM	Single Source Brand	Gastrointestinal Drugs	\$3,807,348	2.96%	23,606	\$4.57	6,081
2	SINGULAIR	Single Source Brand	Unclassified Agents	\$3,031,860	2.36%	32,475	\$2.70	10,112
3	ENBREL	Single Source Brand	Unclassified Agents	\$2,667,048	2.08%	1,360	\$56.69	345
4	PREVACID	Single Source Brand	Gastrointestinal Drugs	\$2,446,795	1.90%	14,695	\$4.77	3,862
5	CRESTOR	Single Source Brand	Cardiovascular Agents	\$2,303,464	1.79%	27,065	\$2.42	7,257
6	EFFEXOR-XR	Single Source Brand	Central Nervous System	\$2,289,903	1.78%	16,935	\$4.01	4,182
7	VYTORIN	Single Source Brand	Cardiovascular Agents	\$2,130,605	1.66%	24,645	\$2.41	6,608
8	TOPAMAX	Single Source Brand	Central Nervous System	\$2,025,167	1.58%	8,614	\$7.16	2,450
9	ACTOS	Single Source Brand	Hormones & Synthetic Subst	\$1,629,860	1.27%	9,575	\$4.88	2,577
10	LEXAPRO	Single Source Brand	Central Nervous System	\$1,522,337	1.19%	20,993	\$2.18	5,696
11	PLAVIX	Single Source Brand	Blood Form/Coagul Agents	\$1,520,228	1.18%	12,231	\$3.61	3,429
12	AVANDIA	Single Source Brand	Hormones & Synthetic Subst	\$1,456,531	1.13%	9,445	\$4.35	2,501
13	HUMIRA	Single Source Brand	Immunosuppressants	\$1,447,500	1.13%	771	\$54.68	208
14	CYMBALTA	Single Source Brand	Central Nervous System	\$1,443,632	1.12%	11,525	\$3.83	3,149
15	PROTONIX	Single Source Brand	Gastrointestinal Drugs	\$1,350,100	1.05%	12,195	\$3.20	3,197
16	ZYRTEC	Single Source Brand	Antihistamines & Comb.	\$1,255,358	0.98%	33,419	\$1.13	13,786
17	TRICOR	Single Source Brand	Cardiovascular Agents	\$1,230,363	0.96%	12,866	\$2.70	3,364
18	LEVAQUIN	Single Source Brand	Anti-Infective Agents	\$1,170,311	0.91%	12,345	\$10.65	10,043
19	ZETIA	Single Source Brand	Cardiovascular Agents	\$1,144,633	0.89%	14,029	\$2.29	3,834
20	ADVAIR DISKUS 250/50	Single Source Brand	Hormones & Synthetic Subst	\$1,098,342	0.86%	6,239	\$5.21	2,684
21	FEXOFENADINE HCL	Generic	Antihistamines & Comb.	\$1,083,586	0.84%	27,602	\$1.27	10,397
22	LOTREL	Single Source Brand	Cardiovascular Agents	\$1,068,210	0.83%	11,921	\$2.59	3,071
23	LIPITOR	Single Source Brand	Cardiovascular Agents	\$1,056,205	0.82%	12,096	\$2.35	3,262
24	SIMVASTATIN	Generic for Zocor	Cardiovascular Agents	\$1,043,946	0.81%	52,880	\$0.56	14,028
25	IMITREX	Single Source Brand	Autonomic Drugs	\$1,035,989	0.81%	5,520	\$12.99	2,155

*"Product Name" includes all strengths/formulations of a drug.

Note: DAW stands for "Dispensed As Written"

Prescription Drug Utilization (continued)

In summary the top 25 drugs represent 16.77 % of the total scripts and 32.90 % of total Rx expenditures.

Summary	Net Pay Rx	Scripts Rx	Days Supply Rx
Top Drugs	\$42,259,320	415,047	13,869,035
All Product Names	\$128,444,764	2,474,910	69,655,053
Top Drugs as Pct of All Drugs	32.90%	16.77%	19.91%

Utilization

The top 25 clinical conditions based on “incurred claims” for January through June 2007 are detailed below. (Note: Medical Payments represents only the payments made for the specified condition.)

	Clinical Conditions	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER
1	Signs/Symptoms/Oth Cond, NEC	\$ 24,409,942	\$ 3,812,382	\$ 20,272,253	2.84	7.87	368.48	12.25
2	Prevent/Admin Hlth Encounters	\$ 19,304,186	\$ 95,946	\$ 19,198,146	0.07	3.25	646.44	1.05
3	Respiratory Disord, NEC	\$ 18,811,007	\$ 5,088,373	\$ 13,671,249	3.18	2.69	123.22	16.91
4	Coronary Artery Disease	\$ 18,464,102	\$ 11,508,073	\$ 6,954,443	4.71	3.44	69.08	2.84
5	Gastroint Disord, NEC	\$ 15,137,815	\$ 2,567,576	\$ 12,561,381	2.15	3.78	160.71	16.95
6	Spinal/Back Disorders, NEC	\$ 14,694,312	\$ 3,497,738	\$ 11,190,022	1.32	2.79	669.85	5.16
7	Arthropathies/Joint Disord NEC	\$ 13,436,574	\$ 1,245,472	\$ 12,170,066	0.6	2.75	751.04	6.98
8	Osteoarthritis	\$ 13,419,747	\$ 8,370,737	\$ 5,040,498	3.49	3.24	189.14	0.37
9	Pregnancy w Vaginal Delivery	\$ 8,664,660	\$ 8,614,137	\$ 50,522	6.95	2.45	0.5	0.02
10	Cancer - Breast	\$ 8,413,059	\$ 357,845	\$ 8,045,643	0.44	3.7	52.83	0.05
11	Infections - ENT Ex Otitis Med	\$ 7,341,616	\$ 131,569	\$ 7,208,093	0.3	2.81	625.49	10.25
12	Renal Function Failure	\$ 6,612,472	\$ 1,001,295	\$ 5,518,092	0.49	5.18	13.5	0.39
13	Condition Rel to Tx - Med/Surg	\$ 6,511,947	\$ 4,917,079	\$ 1,579,761	2.14	5.35	7.27	1.89
14	Chemotherapy Encounters	\$ 6,386,796	\$ 1,198,778	\$ 5,188,017	0.44	5.7	2.17	
15	Newborns, w/wo Complication	\$ 6,172,247	\$ 5,966,625	\$ 205,556	9.86	3.56	4.78	0.12
16	Cholecystitis/Cholelithiasis	\$ 5,612,019	\$ 1,450,053	\$ 4,161,966	1.28	3.41	7.26	1.46
17	ENT Disorders, NEC	\$ 5,314,514	\$ 217,390	\$ 5,096,075	0.13	2.56	675.03	2.8
18	Infec/Inflam - Skin/Subcu Tiss	\$ 5,287,859	\$ 1,097,009	\$ 4,185,255	1.31	4.29	259.85	5.04
19	Gynecological Disord, NEC	\$ 5,031,150	\$ 752,516	\$ 4,278,634	0.86	2.13	82.43	1.3
20	Hypertension, Essential	\$ 4,944,896	\$ 850,373	\$ 4,092,316	0.56	3.22	321.43	1.74
21	Cardiac Arrhythmias	\$ 4,874,395	\$ 2,314,842	\$ 2,553,901	1.32	2.56	42.83	2.16
22	Nutritional Disorders, NEC	\$ 4,795,263	\$ 831,117	\$ 3,959,387	0.98	2.81	205.75	1.86
23	Diabetes	\$ 4,788,823	\$ 1,219,298	\$ 3,565,958	0.95	5.27	207.06	1.46
24	Urinary Tract Calculus	\$ 4,466,788	\$ 501,322	\$ 3,965,466	0.81	1.93	16.32	4.26
25	Hernia/Reflux Esophagitis	\$ 4,407,233	\$ 978,502	\$ 3,428,616	0.74	3.98	53.23	1.13

*Based on ICD-9 codes that could not be attributed to any other condition.

Utilization (continued)

In summary, the top 25 clinical conditions represent approximately 59% of total paid claims for all clinical conditions.

Summary	Net Pay Med	Net Pay IP Acute	Net Pay OP Med	Admits Per 1000 Acute	Days LOS Admit Acute	Visits Per 1000 Office Med	Visits Per 1000 ER
Top Clinical Conditions	\$237,303,421	\$68,586,047	\$168,141,316	47.9	3.61	5,555.69	98.44
All Clinical Conditions	\$402,555,011	\$117,762,884	\$283,804,643	89.5	3.83	8,455.84	215.6
Top Clinical Conditions as Pct of All Clinical Conditions	58.95%	58.24%	59.25%	53.52%	94.23%	65.70%	45.66%

Claims Lag Analysis

The following claims lag information is based on medical claims (does not include Rx) incurred January through June 2007

Plans	Number of Medical Claims	Avg Days Lag Per Claim	% Claims Paid Within 30 Days	% Claims Paid Within 60 Days	% Claims Paid Within 90 Days
Commonwealth Enhanced	1,547,555	19.4	84.24%	93.58%	96.93%
Commonwealth Essential	27,095	23.3	78.64%	91.29%	95.63%
Commonwealth Premiere	2,080,376	19.3	84.28%	93.80%	97.10%
Commonwealth Select	36,207	20.1	83.59%	92.71%	96.51%
~Missing	12,062	37.6	60.94%	78.46%	89.94%
All Plans	3,703,295	19.4	84.14%	93.63%	96.99%

*Missing means the claims could not be tagged to a specific plan.

Claims Lag Analysis (continued)

The following claims lag information is based on all claims (**Medical and Rx**) incurred and paid during the most recent rolling year.

	Paid					
Incurred	Oct-06	Nov-06	Dec-06	Jan-07	Feb-07	Mar-07
Aug-06	\$5,336,499	\$2,241,538	\$1,071,890	\$796,623	\$179,170	\$229,836
Sep-06	\$28,271,700	\$4,948,949	\$2,146,331	\$832,198	\$681,156	\$444,864
Oct-06	\$46,580,222	\$27,686,628	\$6,768,712	\$2,272,198	\$1,038,756	\$374,111
Nov-06		\$43,819,955	\$32,788,971	\$5,738,706	\$1,922,846	\$1,033,579
Dec-06			\$44,152,401	\$31,923,797	\$5,894,355	\$2,374,453
Jan-07				\$46,939,731	\$29,848,145	\$6,271,762
Feb-07					\$41,122,455	\$31,104,382
Mar-07						\$50,544,545
Apr-07						
May-07						
Jun-07						
Jul-07						

	Paid					
Incurred	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07
Aug-06	\$196,945	\$156,517	\$24,652.94	\$14,102.38	(\$223,385.91)	\$172,566.45
Sep-06	\$78,797	\$32,987	\$31,987.27	\$47,760.55	(\$156,883.40)	\$290,991.06
Oct-06	\$315,864	\$314,675	\$100,678.47	\$58,885.53	(\$308,525.05)	\$63,553.74
Nov-06	\$605,908	\$221,290	\$194,131.54	\$131,110.12	\$154,562.45	(\$91,957.90)
Dec-06	\$1,011,577	\$546,965	\$466,715.82	\$146,162.77	\$184,923.52	(\$10,642.64)
Jan-07	\$2,381,415	\$978,324	\$925,877.29	\$234,175.41	\$404,025.95	\$753,554.06
Feb-07	\$4,572,115	\$1,781,365	\$855,631.13	\$479,846.16	\$219,936.50	\$57,381.74
Mar-07	\$32,141,571	\$6,302,658	\$3,344,199.20	\$906,994.53	\$1,531,347.36	\$293,998.61
Apr-07	\$42,507,670	\$33,125,491	\$5,644,548.25	\$2,140,220.39	\$1,369,212.09	\$407,501.21
May-07		\$46,482,598	\$35,121,507.39	\$4,965,627.81	\$2,777,600.79	\$702,179.18
Jun-07			\$50,659,703.73	\$32,839,646.69	\$6,371,563.14	\$1,889,269.24
Jul-07				\$52,196,605.28	\$34,282,783.70	\$5,298,392.73

Claims Distribution based on Age/Gender

The following is based on claims incurred January through June 2007.

	Female			Male		
Age Group Medstat	Members Avg	Net Pay Med and Rx	Net Pay Per Member	Members Avg	Net Pay Med and Rx	Net Pay Per Member
Ages < 1	270.2	\$3,285,330.18	\$3,285,330.18	274.3	\$4,396,779.27	\$4,396,779.27
Ages 1-4	4,564.30	\$4,303,727.11	\$4,303,727.11	4,856.20	\$5,120,927.32	\$5,120,927.32
Ages 5-9	6,205.00	\$3,699,130.61	\$3,699,130.61	6,407.30	\$4,740,512.44	\$4,740,512.44
Ages 10-14	6,780.50	\$4,111,897.97	\$4,111,897.97	7,173.50	\$4,630,830.78	\$4,630,830.78
Ages 15-17	4,676.30	\$5,806,587.40	\$5,806,587.40	5,057.50	\$4,860,789.39	\$4,860,789.39
Ages 18-19	3,280.50	\$2,994,767.18	\$2,994,767.18	3,386.70	\$3,139,863.85	\$3,139,863.85
Ages 20-24	7,115.70	\$8,052,800.85	\$8,052,800.85	6,433.80	\$5,024,735.67	\$5,024,735.67
Ages 25-29	8,204.80	\$14,357,707.34	\$14,357,707.34	3,825.30	\$3,035,075.29	\$3,035,075.29
Ages 30-34	8,923.70	\$18,343,650.62	\$18,343,650.62	4,892.20	\$4,754,580.51	\$4,754,580.51
Ages 35-39	10,880.50	\$20,471,783.04	\$20,471,783.04	5,673.80	\$6,951,508.38	\$6,951,508.38
Ages 40-44	11,812.70	\$24,462,975.63	\$24,462,975.63	6,357.30	\$10,130,305.35	\$10,130,305.35
Ages 45-49	14,466.50	\$35,436,325.20	\$35,436,325.20	7,692.30	\$15,794,433.86	\$15,794,433.86
Ages 50-54	17,695.20	\$49,780,414.94	\$49,780,414.94	10,158.80	\$24,923,398.39	\$24,923,398.39
Ages 55-59	19,814.00	\$63,882,728.16	\$63,882,728.16	12,580.20	\$38,021,645.57	\$38,021,645.57
Ages 60-64	16,123.00	\$62,579,212.96	\$62,579,212.96	10,877.50	\$44,237,359.16	\$44,237,359.16
Ages 65-74	3,826.00	\$15,751,151.12	\$15,751,151.12	2,743.20	\$13,836,613.88	\$13,836,613.88

Allowed Amount Distribution

The following table shows the distribution of members with allowed amount of charges within specified ranges for 2005, 2006 and Year-to-Date for 2007. The distribution is based on incurred claims.

Jan - June 07

Allowed Amount	2005	2006	2007
less than 0.00	90	6	2
\$0.00 - \$499.99	50,002	54,064	74,814
\$500.00 - \$999.99	29,232	32,891	39,992
\$1,000.00 - \$1,999.99	35,407	40,351	40,040
\$2,000.00 - \$4,999.99	47,471	54,403	38,738
\$5,000.00 - \$9,999.99	26,210	30,338	15,198
\$10,000.00 - \$14,999.99	9,138	10,591	4,860
\$15,000.00 - \$19,999.99	4,055	4,716	2,076
\$20,000.00 - \$29,999.99	3,539	4,267	1,797
\$30,000.00 - \$49,999.99	2,312	2,844	1,220
\$50,000.00 - \$74,999.99	932	1,087	519
\$75,000.00 - \$99,999.99	390	473	191
\$100,000.00 - \$149,999.99	299	351	152
\$150,000.00 - \$199,999.99	116	114	50
\$200,000.00 - \$249,999.99	57	63	22
over \$249,999.99	74	96	39
Total	209,324	236,655	219,710

Summary of Enrollment and Claims

The following provides a summary of members, incurred medical claims, and incurred Rx claims for the most recent rolling year.

Time Period	Members	Net Pay Med and Rx	Net Pay Med	Net Pay Rx	Claims Paid	Claims Paid Med	Scripts Rx
July-06	235,112	\$80,338,477.46	\$61,400,189.94	\$18,938,287.52	635,856	263,398	365,224
August-06	233,040	\$85,994,755.59	\$65,690,037.05	\$20,304,718.54	675,654	279,216	386,930
September-06	233,806	\$78,105,244.93	\$58,657,994.99	\$19,447,249.94	636,723	250,044	379,196
October-06	238,697	\$85,265,759.35	\$64,647,475.35	\$20,618,284.00	694,272	287,136	400,169
November-06	239,513	\$86,519,099.85	\$65,695,871.10	\$20,823,228.75	701,037	289,985	404,006
December-06	239,277	\$86,690,707.44	\$65,341,305.05	\$21,349,402.39	691,929	268,884	415,993
January-07	241,464	\$88,737,009.78	\$66,998,022.27	\$21,738,987.51	741,363	300,806	432,734
February-07	241,625	\$80,193,112.37	\$60,399,860.36	\$19,793,252.01	662,201	265,752	389,825
March-07	241,951	\$95,065,313.32	\$72,490,686.46	\$22,574,626.86	746,844	301,191	437,999
April-07	242,700	\$85,194,643.41	\$64,240,154.30	\$20,954,489.11	680,570	272,316	400,858
May-07	242,972	\$90,049,513.16	\$68,084,968.21	\$21,964,544.95	705,471	280,881	417,036
June-07	243,692	\$91,760,182.80	\$70,341,319.65	\$21,418,863.15	681,535	278,052	396,458

NOTE: Includes run out data from all Carriers

The following illustrates the change in incurred claims amounts (includes medical and Rx) by rolling year.

	Members	Total Medical and Rx Claims	Total Medical Claims	Total RX Claims
Jun 2005 - May 2006	233,065	\$895,857,769	\$687,632,661	\$208,967,789
Jun 2006 - May 2007	240,150	\$1,033,914,248	\$783,987,885	\$249,926,363
% Change (Roll Yrs)	3.00%	15.40%	14.00%	19.60%

Additional Miscellaneous Information

Waivers

2007 :

Number of waivers at any point in 2007 : 36,771

Current Waivers as of 11/27/07 34,500

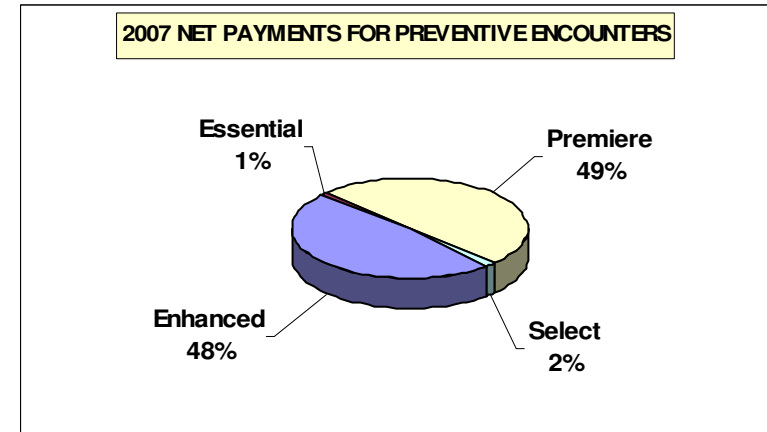
2008:

**Future Plan Waivers for 2008 33,722
as of 11/28/07**

Preventive/Admin Encounters

Net Payments	2006	2007	Percent Change from 2006	Plan Percent of Total
Enhanced	\$5,112,017	\$5,943,569	16.27%	47.51%
Essential	\$125,860	\$127,658	1.43%	1.02%
Premiere	\$5,812,104	\$6,235,639	7.29%	49.84%
Select		\$204,521	NA	1.63%

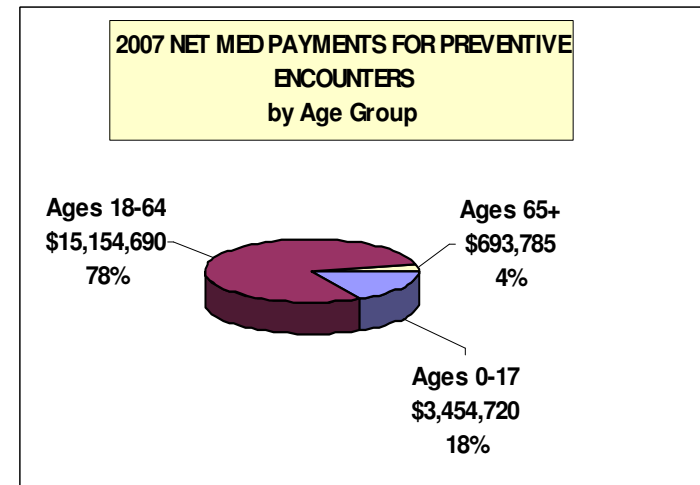
TOTAL	\$11,049,981	\$12,511,388	13.23%
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Prevent/Admin Hlth Encounters

Incurred
YTD

Age Groups	Patients Med	Net Pay Med	Net Pay Per Patient Med	Net Pay PMPY Med
Ages 0-17	13,620	\$3,454,720	\$253.65	\$149.34
Ages 18-64	61,047	\$15,154,690	\$248.25	\$159.36
Ages 65+	2,430	\$693,785	\$285.51	\$211.22
TOTAL	77,097	19,303,195	787	520



Preventive/Admin Encounters (continued) Top 20 Preventive Expenditures by Plan (Ranked by Net Payment) Jan - Jun, 2007

Essential			Enhanced			Payment
1	Prev Visit, Est, Age 40-64	\$11,950.00	1	Prev Visit, Est, Age 40-64		\$764,179.62
2	Prev Visit, Est, Age 18-39	\$8,059.53	2	Prev Visit, Est, Age 18-39		\$433,486.16
3	Prev Visit, Est, Age 1-4	\$7,204.77	3	Cytopath C/V Auto Fluid Redo		\$363,283.38
4	Per Pm Reeval, Est Pat, Inf	\$7,136.85	4	Mammogram, Screening		\$349,039.98
5	Pneumococcal Vacc, Ped <5	\$6,303.63	5	H Papilloma Vacc 3 Dose Im		\$244,219.96
6	Mammogram, Screening	\$5,677.50	6	Prev Visit, Est, Age 1-4		\$225,205.83
7	H Papilloma Vacc 3 Dose Im	\$5,093.77	7	Per Pm Reeval, Est Pat, Inf		\$202,053.67
8	Cytopath C/V Auto Fluid Redo	\$4,984.34	8	Diagnostic Colonoscopy		\$181,604.07
9	Prev Visit, Est, Age 12-17	\$4,535.95	9	Pneumococcal Vacc, Ped <5		\$179,462.95
10	Prev Visit, New, Age 18-39	\$4,441.12	10	Screeningmammographydigital		\$163,356.99
11	Dtap-Hep B-lpv Vaccine, Im	\$3,944.09	11	Prev Visit, Est, Age 5-11		\$114,222.36
12	Prev Visit, Est, Age 5-11	\$3,328.85	12	Prev Visit, New, Age 18-39		\$107,900.26
13	Prev Visit, New, Age 40-64	\$2,606.17	13	Prev Visit, Est, Age 12-17		\$98,084.95
14	MmrV Vaccine, Sc	\$2,456.68	14	Prev Visit, New, Age 40-64		\$96,768.48
15	Office/Outpatient Visit, Est	\$2,069.28	15	Office/Outpatient Visit, Est		\$96,443.45
16	Cytopath, C/V, Thin Layer	\$2,021.04	16	Dtap-Hep B-lpv Vaccine, Im		\$88,802.85
17	Screeningmammographydigital	\$1,990.81	17	MmrV Vaccine, Sc		\$84,048.68
18	Rotovirus Vacc 3 Dose, Oral	\$1,967.92	18	Rotovirus Vacc 3 Dose, Oral		\$80,869.91
19	Meningococcal Vaccine, Im	\$1,880.91	19	Cytopath, C/V, Thin Layer		\$75,398.33
20	Diagnostic Colonoscopy	\$1,782.12	20	Chicken Pox Vaccine, Sc		\$69,557.46
PREMIER			Select			
1	Prev Visit, Est, Age 40-64	\$1,017,573.74	1	Prev Visit, Est, Age 40-64		\$20,536.72
2	Mammogram, Screening	\$472,953.95	2	Prev Visit, Est, Age 1-4		\$16,798.26
3	Cytopath C/V Auto Fluid Redo	\$354,219.83	3	Prev Visit, Est, Age 18-39		\$14,850.60
4	Prev Visit, Est, Age 18-39	\$292,400.53	4	Per Pm Reeval, Est Pat, Inf		\$11,141.73
5	Diagnostic Colonoscopy	\$285,266.38	5	Pneumococcal Vacc, Ped <5		\$10,206.85
6	Screeningmammographydigital	\$212,746.60	6	Cytopath C/V Auto Fluid Redo		\$8,917.18
7	H Papilloma Vacc 3 Dose Im	\$189,318.74	7	Prev Visit, Est, Age 5-11		\$8,448.43
8	Per Pm Reeval, Est Pat, Inf	\$155,043.47	8	H Papilloma Vacc 3 Dose Im		\$8,232.80
9	Prev Visit, Est, Age 1-4	\$152,415.53	9	Mammogram, Screening		\$8,036.03
10	Pneumococcal Vacc, Ped <5	\$134,766.28	10	MmrV Vaccine, Sc		\$5,508.76
11	Prev Visit, New, Age 40-64	\$115,649.89	11	Prev Visit, Est, Age 12-17		\$5,428.94
12	Office/Outpatient Visit, Est	\$111,852.91	12	Rotovirus Vacc 3 Dose, Oral		\$4,683.74
13	Anesth, Low Intestine Scope	\$100,175.04	13	Dtap-Hep B-lpv Vaccine, Im		\$4,393.75
14	Cytopath, C/V, Thin Layer	\$84,255.98	14	Chicken Pox Vaccine, Sc		\$4,113.73
15	Prev Visit, Est, Age 12-17	\$76,810.65	15	Prev Visit, New, Age 18-39		\$4,041.86
16	Prev Visit, Est, Age 5-11	\$75,005.04	16	Prev Visit, New, Age 40-64		\$3,606.68
17	Dtap-Hep B-lpv Vaccine, Im	\$69,854.73	17	Immunization Admin		\$3,498.36
18	Prev Visit, New, Age 18-39	\$63,756.53	18	Meningococcal Vaccine, Im		\$3,301.29
19	Rotovirus Vacc 3 Dose, Oral	\$63,166.12	19	Screeningmammographydigital		\$3,215.17
20	Office/Outpatient Visit, Est	\$63,042.57	20	Diagnostic Colonoscopy		\$2,716.48